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		Attorr	tomey Docket No. M81.12-0065						
_	UTILITY PATENT APPLICATION	First I	· · · · · · · · · · · · · · · · · · ·				И. Bjork et al. О		
	Title	Title SURGICAL CLAMP				<u>-</u>	3		
	TRANSMITTAL	Expre	ess Mail Labe	l No.	EV 1780230	)55 US	ο<	4 	
(Only for new	non-provisional applications under 37 C.F.R. § 1.53(B))	<del>' T</del>		<del></del> -	Mail Stop Pa	t nt Appli	ication (	8	
	APPLICATION ELEMENTS		Address	s To:	C mmissi n P.O. Box 145	er for Pat			
See MPEP	chapter 600 concerning utility patent application contem	ts.			Alexandria,	-	1450 1450		
1.	*Fee Transmittal Form e.g., PTO/SB17)		7.				e, large table or		
2. 🔀	(Submit an original and a duplicate for fee processing)			Com	outer program	Appenaix	7)		
2. <u>(X</u>	Applicant Claims small entity status  Specification [Total Sheets]  28	3	8. Nucl	eotide a	nd/or Amino Aci	d Sequenc	ce Submission		
3. <b>[</b> ]	Specification [Total Sheets 28	1	o. (If	applical	ole, all necessar	y)			
• 7	(preferred arrangement set forth below - Descriptive title of the Invention)		a.	_					
	- Cross References to Related Applications		а. b.		Computer Read ification Sequen				
	- Statement Regarding Fed sponsored R & D				i. CD-ROM o	_			
	Reference to Microfiche Appendix     Background of the Invention				ii. 🗖 Paper				
	- Brief Summary of the Invention		c.		Statement verif	ying identi	ty of above copies		
	<ul> <li>Brief Description of the Drawings (if filed)</li> <li>Detailed Description</li> </ul>	ı		ACC	OMPANYING A	APPLICA"	TION PARTS		
	- Claim(s)		9.				heet & document(s))	:	
	- Abstract of the Disclosure		10	_	C.F.R. § 3.73(b		12.21	ŧ	
				_ (w	hen there is an	assignee)	Attorney		
_	<del></del>	_	11.	_	-		nt (if applicable)		
4.	Drawing(s) (35 U.S.C. § 113) [Total Sheets 1	11)	<sub>12.</sub> [	_	ormation Disclo atement (IDS)/P		Copies o		
5. Oath	or Declaration [Total Sheets 3	] ]	13.	-	eliminary Amen				
		_	14. D		turn Receipt Po				
a. b.	<ul><li>Newly executed (original or copy)</li><li>Copy from a prior application (37 C.F.R. § 1.6)</li></ul>	3(4))	   45	_ `	hould be specifi ertified Copy of F	-			
<u>-</u> .	☐ Copy from a prior application (37 C.F.R. § 1.63 (for continuation/divisional with Box 18 completed)	3(u))	15.	_	foreign priority i				
	i. DELETION OF INVENTOR(S)		16.		onpublication Re			-	
	Signed statement attached deleting inventor(s) named in the prior applica	ition,			its equivalent	ant must a	ittach form PTO/SB/3	5	
_	see 37 C.F.R. §§1.63(d)(2) and 1.33(	b).		<b>J</b> 01	her:				
6 🗷	Application Data Sheet. See 37 CFR 1.76		17.						
	NTINUING APPLICATION, check appropriate box, an	d suppl	y the requisite	informat	on below and in	a prelimina	ry amendment, or in a	n	
Applicat	tion Data Sheet under 37 CFR 1.76:  ☐ Continuation ☐ Divisional ☐ Continuation	-in part			plication No:	1			
Prior	application information: ExaminerONTINUATION or DIVISIONAL APPS only: The entire	-	Gr	oup/Art L	Init:			plied	
under E	Box 4b, is considered a part of the disclosure of the acco	ompany	ring continuat	tion or d	ivisional applica	ition and is	s hereby incorporated	d by	
reteren	ce. The incorporation can only be relied upon when a p		PONDENCE		omitted from t	อนมกกใน	application parts.		
		273	67						
□ Cu	stomer Number or Bar Code Label	_,_		_1_11	or 🗵	Correspon	ndence address below		
	(Insert Customer No. or Attach bar code label here)								
Name	Name Z. Peter Sawicki WESTMAN CHAMPLIN & KELLY								
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Name (Pr	int/type) Z. Peter Sawicki			Registrat	on No. (Attorney//	Agent)	30,214		
Signature			<b>*</b>			Date	10/8/03		

								Compl	ete if Kno	wn	
FEE TRANSMITTAL					Application No.						
					Filing Date						
									Todd M. Bjork et al.		
						First Named Inventor			SURGICAL CLAMP		
					Title						
					Group Art Unit						
					Examiner Name				M04 40 0005		
Total Amount of Payment \$ 570 and \$40					Atty. [	Docket I	Number	r <u>'</u>	M81.12-0065		
METHOD OF PAYMENT (Check One)				FEE CALCULATION (Continued)							
The Director is hereby authorized to charge any additional fee				3. ADDITIONAL FEES							
required under 37 C.F.R. § 1.16 and 1.17, including any petition fee,					Large Entity Small Entit						
and credit any over payments to Deposit Account No. <u>23-1123</u> . Westman, Champlin & Kelly, P.A.				Fee	Fee	Fee	Fee				
2 M DTO 2000 (seems are 1				Code	(\$)	Code	(\$)	Paid			
2. X PTO 2038 forms enclosed				1051	130	2051		S Surcharge - Late filing fee or oath			
FFF CALCULATION					1052	50	2052		5 Surcharge - Late provisional		
FEE CALCULATION							1002	50	2002	_	Filing Fee or cover sheet
1. BAS	SIC FILI	NG FEE					1053	130	1053	13	Non-English specification
Large			l Entity				1812	2,520	1812	2,52	90 For Filing a Request for Reexamination. (ex parte)
Fee	Fee	Fee	Fee				1251	110	2251	5	5 Extension for reply within first month
<u>Code</u>	<u>(\$)</u>	<u>Code</u>	<u>(\$)</u>	-	escription		1252	420	2252	21	0 Extension for reply within second month
1001	770	2001	385	E 00	ility Filing Fee		1253	950	2253	47	5 Extension for reply within third month
1002	340	2002	170		sign Filing Fee		1254	1,480	2254	74	0 Extension for reply within fourth month
1004	770	2004	385	Lines	ssue Filing Fee	•	1255	2,010	2255	1,00	5 Extension for reply within fifth month
1005	160	160 2005 80 □Prov. Filing Fee			1402	330	2402	16	5 Filing a brief in support of an appeal		
					Subtotal	(1) \$ 385	1403	290	2403	14	5 Request for oral hearing
2. EXTRA CLAIM FEES							1814	110	2814	5	5 Terminal Disclaimer Fee
	Numb Claim		or**	Extra	Fee from Below	Fee Paid	1452	110	2452	5	5 Petition to Revive - unavoidable
Total	31	20		11	9	99	1453	1,330	2453	66	5 Petition to Revive - unintentional
Indep.	5	3		2	43	86	1501	1,330	2501	66	5 Utility/Reissue issue fee (inc. advance copies)
Multiple	Depende	ent Claims					1502	480	2502	24	0 Design issue fee (inc. advance copies)
** Insert 3 and 20, or number previously paid if greater; Reissue see below						elow	1460	130	1460	13	0 Petitions to the Commissioner
Large I Fee <u>Code</u>	Entity Fee _(\$)	Small E Fee Code	Intity Fee (\$)	Description	on		1807	50	1807	5	Petitions related to provisional applications
1202 1201	18 86	2202 2201	9 43		excess of 20 ent claims in ex	xcess of 3	1806	180	1806	18	Submission of Information Disclosure     Statement
1203	290	2203	145	Multiple D	ependent Clai	ms	8021	8021 40 8021 40 F		4	<b>B</b>
1204	86	2204	43	Reissue II Original P	ndependent Cli atent	aims over					property (times number of properties)
1205	1205 18 2205 9 Reissue claims in excess of 20 and over original patent						Other F	ee (speci	fy)		
Subt tal (2) \$ 185											Subtotal (3) \$

Signature (Z. Peter Sawicki)

Date Ochoben 8 H., 2003

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